

SELF AUDIT DISCLOSURE REPORT

Facility Name: Morton Elementary School # 1380
Facility Address: 2501 S. 63rd Street
Philadelphia, PA 19142

Audit Date: April 30, 2008

Audit Personnel: Alisa Otteni, CPEA, URS Corporation
Brian Joseph, URS Corporation

URS performed an Asbestos Hazard Emergency Response Act (AHERA) Environmental Compliance Audit (audit) at the Morton Elementary School in accordance with Section IV of the "Self-Audit/Self Disclosure Agreement" between the United States Environmental Protection Agency, Region III (EPA) and the School District of Philadelphia (School District), effective as of March 9, 2007. The focus of the audit was to evaluate compliance with the regulatory programs required by the "Self-Audit/Self Disclosure Agreement." The audit was conducted under the environmental regulations set forth in the "Self-Audit/Self Disclosure Agreement." URS reviewed the following programs, in accordance with the scope in Section IV B of the "Self-Audit/Self Disclosure Agreement":

1. Asbestos Hazard Emergency Response Act (AHERA): (40 CFR Part 763), Subpart E. The Asbestos Audit will determine compliance with Toxic Substances Control Act (TSCA), Subchapter II (the Asbestos Hazard Emergency Response Act or AHERA), 15 U.S.C. §§ 2641 to 2646, and the federal regulations implementing AHERA as set forth at 40 C.F.R. Part 763 Subpart E.

The audit was conducted on behalf of the School District by URS Corporation on April 30, 2008. Approximately ten days prior to the audit, the facility was provided with a tentative audit time schedule and a list of documents to gather for review during the audit.

Findings were also reviewed with regards to the following nine requirements needed in order to satisfy the EPA's Self-Disclosure Policy.

Systematic discovery of the violation through an environmental audit or the implementation of a compliance management system.

Voluntary discovery of the violation was not detected as a result of a legally required monitoring, sampling or auditing procedure.

Prompt disclosure in writing to EPA within 21 days of discovery or such shorter time as may be required by law. Discovery occurs when any officer, director, employee or agent of the facility has an objectively reasonable basis for believing that a violation has or may have occurred. However, the 21 day reporting requirement was waived by the EPA in accordance with this agreement policy (see section IV. C. and IV.D.2 of the agreement).

Independent discovery and disclosure before EPA or another regulator would likely have identified the violation through its own investigation or based on information provided by a third-party.

Correction and remediation within 60 calendar days, in most cases, from the date of discovery.

Prevent recurrence of the violation.

Repeat violations are ineligible, that is, the specific (or closely related) violations have occurred at the same facility within the past 3 years or those that have occurred as part of a pattern at multiple facilities owned or operated by the same entity within the past 5 years; if the facility has been newly acquired, the existence of a violation prior to acquisition does not trigger the repeat violations exclusion.

Certain types of violations are ineligible such as those that result in serious actual harm, those that may have presented an imminent and substantial endangerment, and those that violate the specific terms of an administrative or judicial order or consent agreement.

Cooperation by the disclosing entity is required.

The personnel selected for this project are experienced senior and project level staff that has completed many Environmental Compliance Audits in the past. Ms. Alisa Otteni, CPEA, the lead auditor, has managed more than two hundred multi-media environmental compliance audits throughout the United States. She has been a URS project manager for more than sixteen years. Ms. Otteni was assisted by Mr. Brian Joseph. Mr. Joseph has seven years of experience in environmental testing and inspections. Mr. Joseph is an accredited and licensed AHERA Building Inspector, Supervisor and Management Planner.

The audit included the following:

- Opening meeting with the Assistant School Principal and Building Engineer;
- Review of documentation pertaining to the scope of the audit;

- Detailed tour of specific site areas, deemed necessary by auditors;
- Closing meeting with the Assistant School Principal and Building Engineer.

The following the School District staff attended the opening meeting on April 30, 2008:

- Mr. Kevin King, Assistant School Principal
- Mr. Getnet Getnet Building Engineer

The following the School District staff attended the closing meeting on April 30, 2008:

- Mr. Kevin King, Assistant School Principal
- Mr. Getnet Getnet Building Engineer

The Morton Elementary School consists of kindergarten to fifth grade and has currently maintains approximately seven hundred (700) students. The facility was constructed in the 1970.

Review of AHERA documentation was conducted in the Principal's office and the Building Engineer's office. Personnel representing the various departments were interviewed during the record review.

Regulatory findings are presented below. A corrective action plan and associated exhibits are provided in a separate document titled "Self Audit Disclosure Corrective Action Plan."

1.0 ASBESTOS EMERGENCY RESPONSE ACT (AHERA)

The facility was evaluated for compliance with the following regulations:

1. An up-to-date Inspection/Re-inspection schedule that complies with the requirements found at 40 C.F.R. § 763.80;
2. An up-to-date Management Plan that complies with the requirements of 40 C.F.R. § 763.93;
3. A training and periodic surveillance schedule that complies with the requirements found at 40 C.F.R. § 763.92;
4. An Operation and Maintenance plan that complies with the requirements found at 40 C.F.R. § 763.91.
5. A "Designated Person" that complies with the requirements found at 40 C.F.R. § 763.84(g);
6. A plan to provide annual notifications as required 40 C.F.R. § 763.93(g)(4); and
7. A record keeping plan that complies with the requirements found at 40 C.F.R. § 763.94.

FINDING NUMBER: 1 (Re-inspections)

Regulatory Citation: 40 CFR § 763.85(b)

Description of Finding: The school is required to complete Three Year Re-inspections. Minor data gaps were identified following the 1997 and 2003 Re-inspections where these inspections were not completed with in the required time frame. The data gaps ranged from 1 to 3 months.

Date of Non-Compliance: 1997 and 2003

Corrective Action: The school must complete the Re-inspections every three (3) years. This is a historical finding as the school can not complete missing data gaps.

Actions to Prevent Reoccurrence: Implement a schedule and track the Three Year Re-inspection in a compliance calendar.

Filed For Extension: Yes No

Satisfy the Nine (9) Conditions of Eligibility: Yes No (explain)

FINDING NUMBER: 2 (Re-inspections)

Regulatory Citation: 40 CFR § 763.85(b)(1)(vii))

Description of Finding: The regulations require that the Three Year Re-inspections records be updated within thirty (30) days of the inspection. The most recent Re-inspection Report is dated November 2006 and was available for review at the central file and the school building; however it was recently printed / distributed and was not completed within the required thirty (30) day time frame from the inspection date in November 2006.

Date of Non-Compliance: December 2006

Corrective Action: The Three Year Re-inspection records must be updated within thirty (30) days of the actual inspection. This is a historical finding.

Actions to Prevent Reoccurrence: Implement and track the Re-inspection date in a compliance calendar so that the thirty (30) day update can be tracked by personnel in the central office during the next Three Year Re-inspection in 2009.

Filed For Extension: Yes No

Satisfy the Nine (9) Conditions of Eligibility: Yes No (explain)

FINDING NUMBER: 3 (Periodic Inspections)

Regulatory Citation: 40 CFR § 763.94)(d)

Description of Finding: The school is required to complete Six Month Periodic Surveillance Inspections. Varied data gaps exist between the Six Month Periodic Surveillance Inspections ranging from one (1) to nineteen (19) months.

Date of Non-Compliance: The data gaps were noted from 1989 - 2004.

Corrective Action: The school must complete Periodic Surveillance Inspections every six (6) months. This is a historical finding as the school can not complete past missed inspections.

Actions to Prevent Reoccurrence: Implement a schedule and track the Six Month Periodic Surveillance Inspection in a compliance calendar.

Filed For Extension: Yes No

Satisfy the Nine (9) Conditions of Eligibility: Yes No (explain)